

CHARGE OF DISCRIMINATION This form is affected by the Privacy Act. See enclosed Privacy Act Statement and other information before completing this form.		Charge Presented To: _____ Agency(ies) Charge No(s): _____ <input type="checkbox"/> FEPA <input checked="" type="checkbox"/> EEOC <i>423-2009-01094</i>
Name (Indicate Mr., Ms.) Ms. Magnolia Perez		State or Local Agency, If Any <i>Mississippi</i> RECEIVED Date of Rec'd <i>May 17, 2009</i> EEOC
Street Address REDACTED		City, State and ZIP Code <i>REDACTED</i>
Named Is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That You Believe Discriminated Against You or Others. (If more than two are named, list under PARTICULARS below.)		
Employer Koch Foods of Mississippi, LLC		No. Employees, Members _____ Phone No. with Area Code _____
Employer Address 4688 Highway 80 Morton, MS 39117		City, State and ZIP Code _____
Employer Name _____ Employer Street Address _____		No. Employees, Members _____ Phone No. with Area Code _____
Employer Street Address _____		City, State and ZIP Code _____
DISCRIMINATION BASED ON (Check appropriate boxes)		
<input checked="" type="checkbox"/> RACE <input type="checkbox"/> COLOR <input checked="" type="checkbox"/> SEX <input type="checkbox"/> RELIGION <input checked="" type="checkbox"/> NATIONAL ORIGIN <input checked="" type="checkbox"/> RETALIATION <input type="checkbox"/> AGE <input type="checkbox"/> DISABILITY <input type="checkbox"/> OTHER (Specify below)		DATE(S) DISCRIMINATION TOOK PLACE Earliest _____ Latest _____
<input type="checkbox"/> CONTINUING ACTION		
Particulars Are of additional property needed, attach extra sheet(s):		
<p>I was formerly employed by Koch Foods in Morton, Mississippi in the de-boning area. While working on the line, Jesse, my supervisor would walk up behind me and grope my buttocks and thighs or run his thumb along the underside of my buttocks - he did this almost everyday.</p> <p>On February 13, 2008, I was working alone at the weigh station. I was caught off guard and Jesse grabbed me and forced me against the weigh station. He began to kiss my lips, neck, and face. I struggled to get free, but Jesse grabbed me by my overcoat and ripped it open and forced his hands inside my blouse and groped my breasts. He began to rip at my pants, but I was able to fight free and ran away. I ran toward the stairs to go upstairs to the office and report this constant sexual abuse and harassment. Jesse pursued me into the stairwell and told me that because I am an undocumented worker that I have no rights under the laws of the United States.</p> <p>Jesse deliberately and willfully misled me with regard to my rights as an employee under Title VII of the Civil Rights Act of 1964, as amended.</p>		
** Charge continues on Page 2.		
In this charge filed with both the EEOC and the State or Local Agency, if any, I will advise the agency if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.		NOTARY - When necessary for State or Local Agency Requirements I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief. Signature of Complainant
I declare under penalty of perjury that the above is true and correct.		Subscribed and sworn to before me this date (month, day, year) EXHIBIT 2
3-06-09  Charging Party Signature		Tables

Please incorporate all attached documents
as part of this choice. |

EEOC Form 5 (5/01)

CHARGE OF DISCRIMINATION This form is affected by the Privacy Act. See enclosed Privacy Act Statement and other information before completing this form.		Charge Presented To:	Agency(ies) Charge No(s):		
		<input type="checkbox"/> FEPA			
		<input checked="" type="checkbox"/> EEOC			
and EEOC					
Name (Indicate Mr., Ms., Mrs.) Idalia Domingo-Maldonado		State or Local Agency, If Any			
Street Address REDACTED	City, State and ZIP Code Morton, MS 39117				
Named Is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two are named, list under PARTICULARS below)					
Name Koch Foods of Mississippi, LLC.	No. Employees, Members	Phone No. with Area Code			
Street Address Highway 80, Morton, MS 39117	City, State and ZIP Code				
Name	No. Employees, Members	Phone No. with Area Code			
Street Address	City, State and ZIP Code				
DISCRIMINATORY BEHAVIOR (Check appropriate boxes)		DATE DISCRIMINATION TOOK PLACE Endless Later			
<input checked="" type="checkbox"/> RACE	<input type="checkbox"/> COLOR	<input checked="" type="checkbox"/> SEX	<input type="checkbox"/> RELIGION	<input checked="" type="checkbox"/> NATIONAL ORIGIN	
<input checked="" type="checkbox"/> RETALIATION	<input type="checkbox"/> AGE	<input type="checkbox"/> DISABILITY	<input type="checkbox"/> OTHER (Specify below)		<input type="checkbox"/> CONTINUING ACTION
THE PARTICULARS ARE (If additional paper is needed, attach more sheets)					
<p>I was hired by my former employer on June 6, 2005. I was already working when Jesse Ickom was hired as my supervisor. For a few months, Jesse did not bother me. But, about 6 months later he began to constantly touch my butt and breasts and ask me to have sex with him. One time, Jesse asked Frank, another supervisor, to ask me if I wanted to have sex with Jesse. I told Frank no! Jesse was constantly touching me inappropriately.</p> <p>Once, when I was taking my coat to the coat room, Jesse passed in front of me and touched my vagina by putting his hand between my legs. On other occasions, Jesse offered me money to have sex with him. The worst incident was once when Jesse forced himself on me in a small corridor leading to the bathroom and forced his hands inside my blouse - groping my breasts and nipples with both hands. This occurred in late September 2008.</p> <p>Jesse did not treat white, American, male employees in this manner. I have been discriminated against because of my sex, female, my race, Hispanic and my national origin, Guatemalan. I have been retaliated against for refusing Jesse's sexual advances.</p>					
I want this charge filed with both the EEOC and the State or Local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.		NOTARY - Please initial for State or Local Agency Requirements			
I declare under penalty of perjury that the above is true and correct.		I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief. SIGNATURE OF COMPLAINANT			
03-06-09 <u>It/2/09</u> Date		SUBSCRIBED AND SIGNED TO BEFORE ME THIS DATE (month, day, year)			
Charging Party Signature					

EDC Form 5 (5/01)

CHARGE OF DISCRIMINATION This form is affected by the Privacy Act. See enclosed Privacy Act Statement and other information before completing this form.		Charge Presented To: <input type="checkbox"/> FEPA <input checked="" type="checkbox"/> EEOC 423-2009-01093 RECEIVED and EEOC	
<small>Name (Indicate Mr., Mrs., Miss)</small> Mardoqueo Ariel Lopez		<small>Date or local Agency, if any</small> MAP : 12/09 <small>Date of Birth</small> EEOC/JAO	
<small>Street Address</small> REDACTED		<small>City, State and ZIP Code</small> Morton, MS 39117	
<small>Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two are named, list under PARTICULARS below.)</small>			
<small>Name</small> Koch Foods of Mississippi, LLC		<small>No. Employees, Members</small> 500+	<small>Phone No. with Area Code</small>
<small>Street Address</small> Highway 80, Morton, MS 39117		<small>City, State and ZIP Code</small>	
<small>Name</small> 		<small>No. Employees, Members</small> 	<small>Phone No. with Area Code</small>
<small>Street Address</small> 		<small>City, State and ZIP Code</small> 	
<small>DISCRIMINATION BASED ON (Check appropriate boxes)</small>			
<input checked="" type="checkbox"/> RACE <input type="checkbox"/> COLOR <input checked="" type="checkbox"/> SEX <input type="checkbox"/> RELIGION		<small>DATES DISCRIMINATION TOOK PLACE</small> <small>Earliest</small> <small>Latest</small>	
<input checked="" type="checkbox"/> RETALIATION <input type="checkbox"/> AGE <input type="checkbox"/> DISABILITY <input type="checkbox"/> OTHER (Specify below)		<input checked="" type="checkbox"/> NATIONAL ORIGIN <input type="checkbox"/> CONTINUING ACTION	
<small>THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s))</small>			
<p>I have attached, with the assistance of a translator, Maria Cazorla, a statement of the sex, race and national origin discrimination I have suffered while employed by my current employer, Koch Foods. I have also been repeatedly discriminated against each time I have refused to comply with this discriminatory treatment or have acted to defend my wife.</p>			
<p>I have been forced to work in a sexually hostile work environment as my supervisor, Jesse Ickom, has sexually harassed and assaulted many of my female co-workers. Jesse has also sexually assaulted and harassed my wife, Ivone Castillo, on many occasions. Jesse extorted money from my wife and I. And, when we complained, he would retaliate against me by physically assaulting me. He also attacked my brother-in-law in the parking lot of Koch Foods, with a knife, while I was present.</p>			
<p>I have suffered severe emotional distress as I have been forced to endure Jesse's repeated sexual harassment of my wife. Jesse even threatened my daughter and told my wife and I that we have no rights and that he would have us deported if we reported him.</p>			
<p>Jesse only treats my wife and I in this way because of our race, Hispanic, and our national origin, Guatemalan.</p>			
<small>Want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.</small>		<small>NOTARY - When necessary for State or Local Agency requirement</small>	
<small>declare under penalty of perjury that the above is true and correct.</small>		<small>I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.</small> <small>SIGNATURE OF COMPLAINANT</small>	
<small>03/16/09 John Lopez</small> <small>Charging Party Signature</small>		<small>SUNGRIED AND SWEORN TO BEFORE ME THIS DATE</small> <small>(month, day, year)</small>	

EEOC Form 8 (5/01)

CHARGE OF DISCRIMINATION This form is affected by the Privacy Act. See enclosed Privacy Act Statement and other information before completing this form.		Charge Presented To: <input type="checkbox"/> FEPA <input checked="" type="checkbox"/> EEOC	Agency(ies) Charge No(s): 423-2009-01101
and EEOC			
Name (Indicate Mr., Ms., Mrs.) Mr. Augustin Barragan Davalos		State or Local Agency, If Any	
Street Address REDACTED	City, State and ZIP Code MURKIN TUSCALOOSA AL 35401		
Named Is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two are named, list under PARTICULARS below.)			
Name Koch Foods of Mississippi, LLC	No. Employees, Members 500+	Phone No. with Area Code	
Street Address 4688 Highway 80 Morton, MS 39117	City, State and ZIP Code		
Name	No. Employees, Members	Phone No. with Area Code	
Street Address	City, State and ZIP Code		
DISCRIMINATION BASED ON THE FOLLOWING FACTORS		DATES DISCRIMINATION TO OR PLACE	
<input checked="" type="checkbox"/> RACE <input type="checkbox"/> COLOR <input checked="" type="checkbox"/> SEX <input type="checkbox"/> RELIGION <input checked="" type="checkbox"/> NATIONAL ORIGIN		Earlier Latest	
<input checked="" type="checkbox"/> RETALIATION <input type="checkbox"/> AGE <input type="checkbox"/> DISABILITY <input type="checkbox"/> OTHER (Specify below)		<input type="checkbox"/> CONTINUING ACTION	
THE PARTICULARS ARE IN ADDITIONAL PAPER IS NEEDED, ATTACH WITH THIS FORM			
<p>I was hired by Koch Foods on January 10, 2008. Immediately after I began working, my supervisor, Jesse Ickom, began to harass and intimidate me. He would allow white and black American workers to take restroom breaks as they requested. However, along with many other Mexican, Hispanic workers, I was repeatedly denied restroom breaks. When I confronted Jesse about his discriminatory allocation of restroom breaks, he punched me in the stomach in my lower, right abdomen.</p> <p>In early March of 2008, I requested a transfer to be moved to the de-boning area. Jesse said that I would have to pay \$400 for the transfer. I paid him the \$400, and as of May 9 he still had not moved me to the de-boning area as promised. I confronted him about this, and he told me that the amount I would have to pay for the promotion had gone up to \$600. When I objected to the increase, Jesse physically assaulted me.</p> <p>Jesse Ickom did not charge money before promoting or transferring white or black, American employees. While I do know that Jesse sexually assaulted some Mexican, Hispanic female employees, he did not physically punch, hit, or kick women. The only reason Jesse punched, hit and kicked me is that I am a male. Jesse discriminated against me on the basis of my race and national origin by charging me money for promotions. In retaliation for my complaints of his discrimination, and in an effort to take advantage of my status as an undocumented worker, I was physically abused.</p> <p>My rights under Title VII of the Civil Rights Act of 1964, as amended have been violated.</p>			
I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.		NOTARY - Where necessary for State or Local Agency Requirements	
I declare under penalty of perjury that the above is true and correct.		I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief. SIGNATURE OF COMPLAINANT	
03/06/09 Date		SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE (month, day, year)	
		Charging Party Signature	

ERIC Form 5 (5/01)

THE PARTICULARS ARE ON ADDITIONAL PAPER IF REQUIRED, WHICH ARE SIGNIFIED.

I have been employed by Koch Foods of Mississippi, LLC since May 2008.

Three months after I began work, I requested a transfer from Jesse, my supervisor. On August 16, 2008, Jesse told me that a transfer would cost \$600.00 and must be paid up-front. I told Jesse that I did not have the money, but I would talk to my husband and try to get it.

Soon after, Jesse began coming up behind me on the line and rubbing my buttocks, thighs, and pelvic area. I demanded that he stop, but he didn't. I continued to work because I was afraid of losing my job. He sexually harassed and assaulted me almost weekly.

Within a few days, Jesse was hiding in a hallway and jumped out when I passed by. He grabbed me and pulled me into an isolated area. He told me that I knew what I owed him and that he would get it one way or another. He told me that I had made a contract with him and that in America I had to pay what I promised under the contract. I told him that did not mean sex, but he said he could do whatever he wanted because I am an undocumented worker. *** CHARGE CONTINUES ON PAGE 2

<p>I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.</p>	<p>NOTARY - If necessary for State or Local Agency Requirements</p>
<p>I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.</p> <p>SIGNATURE OF COMPLAINANT</p>	

EEOC Form 8 (5/01)

CHARGE OF DISCRIMINATION This form is affected by the Privacy Act. See enclosed Privacy Act Statement and other information before completing this form.		Charge Presented To:	Agency(ies) Charge No(s):
		<input type="checkbox"/> FEPA <input checked="" type="checkbox"/> EEOC	423-2009-01095
		and EEOC	
Name (Indicate Mr., Ms., etc.) Mr. Jose Dolores Rivera		State or Local Agency, If Any	
Street Address REDACTED		City, State and ZIP Code Morton, MS 39117	
Named Is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That You Believe Discriminated Against Me or Others. (If more than two are named, list under PARTICULARS below.)			
Name Koch Foods of Mississippi, LLC		No. Employees, Members 500+	Phone No. with Area Code
Street Address Highway 80, Morton, MS 39117		City, State and ZIP Code	
Name		No. Employees, Members	Phone No. with Area Code
Street Address		City, State and ZIP Code	
DISCRIMINATION BASED ON (Check appropriate boxes.)			
<input checked="" type="checkbox"/> RACE <input type="checkbox"/> COLOR <input checked="" type="checkbox"/> SEX <input type="checkbox"/> RELIGION <input checked="" type="checkbox"/> NATIONAL ORIGIN <input checked="" type="checkbox"/> RETALIATION <input type="checkbox"/> AGE <input type="checkbox"/> DISABILITY <input type="checkbox"/> OTHER (Specify below) <input type="checkbox"/> CONTINUING ACTION			
THE PARTICULARS ARE (If additional paper is needed, attach more than 10)			
<p>I have attached hereto, with the assistance of a translator, Reverend Wallace Cason, III, a statement of the discrimination I have suffered while working for my current employer, Koch Foods.</p> <p>I have been discriminated against and suffered mistreatment because of my race, Hispanic and my national origin, Mexican. My supervisor, Jesse Ickom did not treat white, American employees in the manner he treated me and my Hispanic co-workers. I have been retaliated against with physical abuse and threats each time I have complained about my treatment.</p> <p>I have been forced to endure a sexually hostile work environment as I have witnessed Jesse's repeated molestation of my female co-workers.</p> <p>Please incorporate my entire attached statement into this Charge.</p>			
I want this charge filed with both the EEOC and the State or Local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures. I declare under penalty of perjury that the above is true and correct.		<small>NOTARY - When necessary for State or Local Agency requirement</small> I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief. <small>SIGNATURE OF COMPLAINANT</small> <small>SUBSCRIBED AND SIGNED TO BEFORE ME THIS DATE</small> <small>(month, day, year)</small>	
Date 23-06-09	Charging Party Signature <i>[Signature]</i>		

EEOC Form 5 (5/01)

CHARGE OF DISCRIMINATION This form is affected by the Privacy Act. See enclosed Privacy Act Statement and other information before completing this form.		Charge Presented To: <input type="checkbox"/> FEPA <input checked="" type="checkbox"/> EEOC Agency(ies) Charge No(s): 423-2009-01092
		RECEIVED <i>MAR 11 2009</i> <i>EEOC/JAC</i>
Name (Indicate Mr., Mrs., Miss) Ms. Aracely Calderon Cortez		Date of Birth
Street Address REDACTED	City, State and ZIP Code Morton, MS 39117	
Named Is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency that I Believe Discriminated Against Me or Others. (If more than two are named, list under PARTICULARS below.)		
Name Koch Foods of Mississippi, LLC	No. Employees, Members	Phone No. with Area Code
Street Address 4688 Highway 80, Morton, MS 39117	City, State and ZIP Code	
DISCRIMINATION BASED ON (Check appropriate boxes.)		DATE(S) DISCRIMINATION TOOK PLACE Earliest _____ Latest _____
<input checked="" type="checkbox"/> RACE <input type="checkbox"/> COLOR <input checked="" type="checkbox"/> SEX <input type="checkbox"/> RELIGION <input checked="" type="checkbox"/> NATIONAL ORIGIN <input checked="" type="checkbox"/> RETALIATION <input checked="" type="checkbox"/> AGE <input type="checkbox"/> DISABILITY <input type="checkbox"/> OTHER (Specify below)		<input type="checkbox"/> CONTINUING ACTION
THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)) I was hired by my employer, Koch Foods of Mississippi, LLC, on June 20, 2007 to work in the de-boning area of the plant. During my first week on the job, Jesse, my supervisor, began to walk up behind me and grope my thighs and buttocks and run his thumb along the underside of my buttocks. During the second week of my employment, he walked up behind me, put his arms around my waist, and groped and rubbed my lower pelvic area as well. Very soon after, Jesse began coming and forcibly removing me from my position on the line. He would drag me into the office while other men would chant and cheer and Jesse would make sexual gestures. In this small isolated office, Jesse would sexually assault me, to varying degrees, on different occasions. Specifically, in December of 2007, Jesse held me down in the office and penetrated me with his fingers. He caused significant injury, and I sought medical treatment as a result. I reported this incident to the office, and was told to get out and go back to my job. Jesse was never disciplined.		
I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.		NOTARY - When necessary for State or Local Agency Requirements
I declare under penalty of perjury that the above is true and correct.		I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief. Aracelye Cortez Signature of Complainant
6/03/09 Date		Subscribed and sworn to before me this date (month, day, year)

*** CHARGE CONTINUES ON PAGE TWO (2)

EEOC Form 5 (5/01)

CHARGE OF DISCRIMINATION

This form is affected by the Privacy Act. See enclosed Privacy Act Statement and other information before completing this form.

Charge Presented To: Agency(ies) Charge No(s):

- FEPA
 EEOC

423-2009-01099

and EEOC

State or Local Agency, If Any

Name (Indicate Mr., Ms.)

Ms. Ana Martin-Perez

Date of Birth

Street Address

REDACTED

City, State and ZIP Code

MS 39117

Named Is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two are named, list under PARTICULARS below.)

Name

Koch Foods, LLC

No. Employees, Members

500 +

Phone No. with Area Code

601-732-8911

Street Address

Hwy 80, Morton, MS 39117

City, State and ZIP Code

Name

No. Employees, Members

Phone No. with Area Code

Street Address

City, State and ZIP Code

DISCRIMINATION BASED ON (Check appropriate boxes)

DID YOU FILE A STATEMENT OF PRACTICE

Earlier

Latest

 RACE COLOR SEX RELIGION NATIONAL ORIGIN RETALIATION AGE DISABILITY OTHER (Specify below) CONTINUING ACTION

THE PARTICULARS ARE (If additional paper is needed, attach extra sheets.)

I was hired by my employer in November 2007. About four months after I started to work, my supervisor, Jesse Ickom, began to sexually harass me. He touched me on my butt and breasts every day as he walked behind me on the line.

Every time I left the line to go to the bathroom, Jesse would follow me and try to kiss me and hug me and touch my breasts and butt. At another time, in March or April of 2008, Jesse came up to me at the quality controller's table and stuck his hand between my legs. I ran away and he followed me asking me to make love with him. Jesse said he would pay me \$300 if I would have sex with him.

After I refused, Jesse moved me to an area where I had to lift heavy boxes. I asked to be moved, and Jesse took me into the office and told me he desired to make love with me. I refused again. Jesse called Ricardo Mesa in and reported that I was not working properly. I told Frank about Jesse sexually harassing and assaulting me.

After my back started to have serious pain, I asked to be off to go to the doctor and Jesse made me pay \$200.00. White, American employees do not have to pay to go to the doctor. Jesse did not sexually harass and assault the white, American female employees either.

I have been discriminated against on the basis of my national origin, Guatemalan, my race, Hispanic, my sex, and retaliated against for reporting Jesse to Frank and also to Ricardo Mesa.

I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.

NOTARY - When necessary for State or Local Agency Requirements

I declare under penalty of perjury that the above is true and correct.

I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.

SIGNATURE OF COMPLAINANT

SUBSCRIBED AND SWEORN TO BEFORE ME THIS DATE
(month, day, year)

Date

Charging Party Signature

EEOC Form 5 (5/01)

CHARGE OF DISCRIMINATION This form is affected by the Privacy Act. See enclosed Privacy Act Statement and other information before completing this form.		Charge Presented To: <input type="checkbox"/> FEPA <input checked="" type="checkbox"/> EEOC	Agency(ies) Charge No(s): <i>RECEIVED 04/02/03</i>
		State or Local Agency, If any <i>ATT 04/02/03</i>	
Name (Indicate Mr., Mrs., Ms.) Mr. Erwin Veany Castillo		Date of Birth EEOC/JAO REDACTED	
Street Address REDACTED		City, State and ZIP Code Mississippi 39117	
Named Is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two are named, list under PARTICULARS below.)			
Name Koch Foods of Mississippi, LLC		I/A, Employee, Member REDACTED	Phone No. with Area Code REDACTED
Street Address Hwy 80 Morton, MS 39117		City, State and ZIP Code REDACTED	
Name REDACTED		I/A, Employee, Member REDACTED	Phone No. with Area Code REDACTED
Street Address REDACTED		City, State and ZIP Code REDACTED	
DISCRIMINATION BASED ON (Check appropriate boxes.)			
<input checked="" type="checkbox"/> RACE <input type="checkbox"/> COLOR <input type="checkbox"/> SEX <input type="checkbox"/> RELIGION		<input checked="" type="checkbox"/> NATIONAL ORIGIN	
<input checked="" type="checkbox"/> RETALIATION <input type="checkbox"/> AGE <input type="checkbox"/> DISABILITY		<input type="checkbox"/> OTHER (Specify below) REDACTED	
		<input type="checkbox"/> CONTINUING ACTION	
DATE(S) DISCRIMINATION TOOK PLACE Earlier Later			
THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s))			
<p>I was hired by my employer on April 18, 2006 to work in the de-boning area.</p> <p>In October of 2006, I requested from my supervisor, Jesse Ickom, that I be allowed to transfer from the packaging area, where I was paid by the hour, to the production area of de-boning, where I would be paid by production because I knew I could make a lot more money. Jesse Ickom told me that the only way I could get the transfer would be to pay \$300 to him. I paid him the money.</p> <p>After I paid Jesse that money, he started charging me money to go to the bathroom (\$5), to go to the doctor (\$20 or \$30), or other things. I told him that I was going to report him to the office for charging me the money and Jesse began to hit me and physically abuse me.</p> <p>Jesse continued to hit me and charge me money until he left Koch Foods. Jesse did not treat white, American, or female employees in this manner. I have suffered discriminatory treatment as a result of my race, Hispanic, national origin, Guatemalan, and in retaliation for protesting my discriminatory treatment.</p> <p>My rights have been violated. I have only now become aware that I had any rights or that I could bring a Charge of Discrimination. I am bringing this charge immediately upon discovering that I had the right to do so. Please incorporate all attachments as part of my charge.</p>			
I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.		NOTARY - (When necessary for State or Local Agency Requirements)	
I declare under penalty of perjury that the above is true and correct.		I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief. SIGNATURE OF COMPLAINANT <i>63-27-09 Erwin Castillo</i>	
Date <i>REDACTED</i>		SUBSCRIBED AND SWEORN TO BEFORE ME THIS DATE (month, day, year)	
Charging Party Signature			

Translator:

EEOC Form 5 (5/01)